**FILED** 

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90267 027 \*\*\*150.00

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 1 78831**

1. Corporation	Name L/0001						
REVIER REAL ESTATE CORPORATION							
HEVIEH HEAL ESTATE SOM CHANCE				# 100010011 <b>0</b> 11 10	AND PRINCIPALINA BURAL HAN ALAN F	AMBAN BABAN BABAN B	JERU 81811 (88)
Principal Place of Business Mailing Address				- !	891 18181 18188 11181 1181 91811 1	HOLLOIDIL SHOLLO	1911 91911 1891
RE/MAX PARTNERS RE/MAX PARTNERS							
2810 E. OAKLAND PARK BL. #200 2810 E. OAKLAND PARK BL.			#200				
FT. LAUDERDALE FL 33306 FT. LAUDERDALE FL 33306					DO NOT WRITE IN THIS SPACE		
				3. Date Incorporate	d or Qualifed		
				<u>06/08/1990</u>			alled Fee
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		<u> </u>	plied For t Applicable
		Suite, Apt. #, etc.		65-0209179	<del></del>	\$8.75 A	
Suite, Apt. #, etc.		27		<ol><li>Certificate of Stat</li></ol>	us Desired	Fee Re	
City & State		City & State		e Election Campain	n Financing —	\$5.00	May Re
23		28			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip	Country	Zip	Country		owes the current year in	tangible	
24	25	29	30	Personal Propert		Yes	<b>Ž</b> Ņo
	9. Name and Address of Current	<del></del>		10. Name and Addr	ess of New Registered	Agent	
	_				1		
GLYNN, RAYMOND E.				Address #77 Box Aurober i	s. Not Acceptable)	Dece	#
	TRADEWINDS AVE. SOUTH	181	Address P.O. Box Minober	AND PARK	<u>(3440)                                    </u>	7-200	
<del>- LAU</del> E	ERDALE BY THE SEA FL 33308	83	1			ļ	
						85 Ziey	Goden /
84				1 AUDER DE	ALE FL	نگتا ا ـ	2306
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the above-named	corporation submits this stat	ement for the purpose of	changing its	registeréd distered
office or n	to the provisions of Sections 607.0502 egistered ageot, or both, in the State of m familiar with, and accept the obligation	r Florida. Such change was au ons of, Section 607.0505, Flori	inorized by the corporate da Statutes.	oration's board of directors. I	Thereby accept the appo	AA	gistored
SIGNATURE	14.	KAUMOND	F GI	WWW -	J//S/	99	
Signature, good or printed name of registered agent and title if applicable. (NOTE: Registered Agent's				equired when reinstating)	DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHAI	NGES TO OFFICERS A	ND DIRECTO  ☐ Change	RS IN 12 Addition
TITLE	DP	☐ DELETE	1.1 TITLE			☐ Criange	
NAME	REVIER, LARRY		1.2 NAME				ļ
STREET ADDRESS			1.3 STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 33306	- Delete	1.4 CITY-ST-ZIP		<del></del>	☐ Change	Addition
TITLE	VPST	☐ DELETE	2.1 TITLE			□ Orlango	[] /(dulion
NAME	GLYNN, RAYMOND E.		2.2 NAME				
STREET ADDRESS	2810 E. OAKLAND PK BLVD. SU	2.3 STREET ADDRESS					
CITY-ST-ZIP	FT. LAUDERDALE FL 33306	□ DELETE	2.4 CITY+ST-ZIP			Change	☐ Addition
TITLE	AS WORDEDWEIED MARRY LID	☐ DELETE	3.1 TITLE				
NAME	VORDERMEIER, HARRY J JR.	ITE AAA	3.2 NAME				
STREET ADDRESS	2810 E. OAKLAND PK BLVD. SU	JITE 200	3.3 STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 33306	☐ DELETE	3.4. CITY-ST-ZIP	VP		Change	☐ Addition
TITLE	AS DALE		4.1 TITLE 4. 2 NAME	<b>''</b>		مور	
NAME 07DEET 4DDDESS	GRUBER, DALE	IITE 200	4. 2 NAME 4.3 STREET ADDRESS				
STREET ADDRESS	2810 E. OAKLAND PK BLVD. SL	JIE 200			٠		
CITY-ST-ZIP TITLE	FORT LAUDERDALE FL 33306	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	VP		Change	Addition
NAME	AS SICILIA, RICK		5.2 NAME	**		-	
STREET ADDRESS							, s
CITY-ST-ZIP FORT LAUDERDALE FL 33306			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP				-
TITLE	AS	☐ DELETE	6.1 TITLE	VP		Change	Addition
NAME	KOEHLER, PATRICIA		6.2 NAME	, ,		•	
STREET ADDRESS		JITE 200	6.3 STREET ADORESS				
i autre umpiredal	LOID L. CANLAND IN DLTD. UL	,,, E ECC	_	1			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied that I am an officer or director of the corporation of the eceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of or an anachment with an address, with all other like empowered.

64 CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP

FORT LAUDERDALE FL 33306

mono